PTO/SB/32 (09-06)
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| REQUEST FOR ORAL HEARING | | | | Docket Number (Optional) | | | |
|---|--|---------------------------------------|-------------|--------------------------|-------------------------------------|---------------|-------------|
| BEFORE THE BOARD OF PATENT APPEALS AND INTERFERENCES | | | | 3430-0131P | | | |
| | In re Applic | | | | | | |
| Kwang-Jo HWANG | | | | | | | |
| | Application Number | | | Filed | | | |
| - | 09/648,111-Conf. #556 | | | Aug | | ust 25, 2000 | |
| | For METHOD OF PATTERNING A METAL LAYER IN A SEMICONDUCTOR DEVICE | | | | | | |
| | Art Unit | 2815 | Exam | niner | N | . D. Richard | is |
| Applicant hereby requests an oral hearing above-identified application. The fee for this Request for Oral Hearing is | | | eals and | d Inte | rferences in th \$ | e appeal of t | the |
| | | | | | · - | 1,000.00 | |
| Applicant claims small entity status above is reduced by half, and the | s. See 37 Cl resulting fee | FR 1.27. Therefore is: | e, the fee | e shov | wn \$ | | |
| X A check in the amount of the fee is | s enclosed. | | | | | | |
| Payment by credit card. Form PT | O-2038 is att | ached. | | | | | |
| The Director has already been aud I have enclosed a duplicate copy of | | | plicatio | n to a | Deposit Accor | unt. | |
| The Director is hereby authorized to Deposit Account No. | | ny fees which may b I have enclose | | | - | | |
| A petition for an extension of time For extensions of time in reexamin | under 37 CF | | B/23) is | | | | |
| I am the | | | | _ | | _ | |
| applicant/inventor. | | | 0 | Q | atti | Clar | me |
| | | | | | Signatu | ire | |
| assignee of record of the entire into See 37 CFR 3.71. Statement und (Form PTO/SB/96) | | .73(b) is enclosed. | | | Esther H. Ch | nong | \subseteq |
| | | | | T | yped or printer | d name | |
| x attorney or agent of record. | | | | | February 5, 2 | 2007 | |
| Registration number 40,95 | | | | | Date | | |
| attorney or agent acting under 37 | CFR 1.34. | | | | | | } |
| Registration number if acting under 37 (| ation number if acting under 37 CFR 1.34. (703) 205-8000 | | | | | | |
| NOTE: Signatures of all the inventors or assig Submit multiple forms if more than one signatu | gnees of record | of the entire interest or see below*. | their repre | esentat | Telephone nu tive(s) are require | | |
| *Total of 1 forms are submit | | | 08 | 2/06/ | 2097 JADDO1 | 00000023 | 0964811 |
| | | | | 1 FC• | | <u> </u> | <u> </u> |

01 FC:1403

PTO/SB/17 (07-06) /2007. OMB 0651-0032 MENT OF COMMERCE lid OMB control number.

| Approved for use through U.S. Patent and Trademark Office; U.S. Dutent and Trademark Office; U.S. Dutent the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displication. | | | | | | | |
|--|--------------------------|-------------------------------------|---------------------------------|----------------------|------------------------|--|--|
| | Effective on 12/08/2004. | | | Complete if Known | | | |
| ı | Fgg | pursuant to the Consolidated Approp | riations Act, 2005 (H.R. 4818). | Application Number | 09/648,111-Conf. #5562 | | |
| | <u>"</u> | FEE TRANS | MITTAL | Filing Date | August 25, 2000 | | |
| Feet pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2006 | | | 006 | First Named Inventor | Kwang-Jo HWANG | | |
| 1 | <u> </u> | <u> </u> | 700 | Examiner Name | N. D. Richards | | |
| | | Applicant claims small entity state | us. See 37 CFR 1.27 | Art Unit | 2815 | | |
| | TO | TAL AMOUNT OF PAYMENT | (\$) 1,000.00 | Attomey Docket No. | 3430-0131P | | |

| METHOD OF PAYMENT (check all that apply) | | | | | | | | |
|---|--|--------------------------|-----------------|--------------------------|-----------------|--------------------------|------------|---------------|
| x Check Credit | Card M | loney Order | None | Other (| please identify | '): | | |
| Deposit Account De | eposit Account Numb | er: <u>02-2448</u> | Deposit Account | Name: | Birch, Stew | art, Kolasch | & Birch, I | _LP |
| For the above-ide | For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | |
| Charge fee | (s) indicated bel | ow | | Charge | e fee(s) indic | ated below, ex | cept for t | he filing fee |
| | additional fee(s | | ments of | x Credit | any overpayr | ments | | |
| FEE CALCULATION | -11 | | | | | | | |
| 1. BASIC FILING, SEAR | CH, AND EXAM | INATION FE | ES | | | | | |
| | | FEES | | CH FEES | | TION FEES | | |
| Application Type | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees | Paid (\$) |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | 1000 | 410 197 |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | |
| 2. EXCESS CLAIM FEES | 3 | | | | | | | Small Entity |
| Fee Description | | | | | | | Fee (\$) | Fee (\$) |
| Each claim over 20 (incl | , | | | | | | 50 | . 25 |
| Each independent claim | • | g Reissues) | | | | | 200 | 100 |
| Multiple dependent clain | | | | | | | 360 | 180 |
| | | | | | | | | |
| HP = highest number of total | X claims paid for, if gr | | | | Fee (| 3 1 | ee Paid (| ภ |
| | | ee (\$) | Fee Paid | (\$) | | | | |
| -= | × | | | | | | | |
| HP = highest number of indep | endent claims paid | for, if greater tha | an 3. | | | | | _ |
| 3. APPLICATION SIZE F | | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | |
| | | | | | | | Fee | Paid (\$) |
| - 100 = | | /50 | (rou | ind up to a who | le number) x | | = | |
| 4. OTHER FEE(S) Fees Paid (\$) | | | | | | | Paid (\$) | |
| | Non-English Specification, \$130 fee (no small entity discount) | | | | | | | |
| Other (e.g., late filing surcharge): 1403 Request for oral hearing | | | | | | 1,0 | 00.00 | |

SUBMITTED BY Registration No. (Attorney/Agent) Signature 40,953 Telephone (703) 205-8000 Name (Print/Type) Esther H. Chong Date February 5, 2007

EHC/DAB/af